

General

Title

Chronic wound care: percentage of patients aged 18 years and older with a diagnosis of diabetes and foot ulcer who were prescribed an appropriate method of offloading (pressure relief) within the 12 month reporting period.

Source(s)

American Society for Plastic Surgeons (ASPS), Physician Consortium for Performance Improvement®, National Committee for Quality Assurance (NCQA). Chronic wound care physician performance measurement set. Chicago (IL): American Medical Association (AMA); 2008 Aug. 35 p. [19 references]

Measure Domain

Primary Measure Domain

Process

The validity of measures depends on how they are built. By examining the key building blocks of a measure, you can assess its validity for your purpose. For more information, visit the [Measure Validity](#) page.

Secondary Measure Domain

Does not apply to this measure

Brief Abstract

Description

This measure is used to assess the percentage of patients aged 18 years and older with a diagnosis of diabetes and foot ulcer who were prescribed an appropriate method of offloading (pressure relief) within the 12 month reporting period.

Rationale

Offloading is a mainstay in the prevention and treatment of diabetic foot ulcers. Despite its importance in the care of patients with diabetic foot ulcers, a recent study examining wound care practices found that

approximately 23% of patients with diabetic ulcers had no documentation of offloading devices.

The following clinical recommendation statements are quoted verbatim from the referenced clinical guidelines and represent the evidence base for the measure:

The reduction of pressure to the diabetic foot ulcer is essential to treatment. Proper off-loading and pressure reduction prevents further trauma and promotes healing. This is particularly important in the diabetic patient with decreased or absent sensation in the lower extremities. (Frykberg et al., American College of Foot and Ankle Surgeons [ACFAS], 2006)

Relieving pressure on the diabetic wound is necessary to maximize healing potential. Acceptable methods of offloading include crutches, walkers, wheelchairs, custom shoes, depth shoes, shoe modifications, custom inserts, custom relief orthotic walkers (CROW), diabetic boots, forefoot and heel relief shoes, and total contact casts. (Wound Healing Society [WHS], 2006)

Removal of pressure from a foot wound (i.e., off-loading) is crucial to the healing process. Many types of devices can offload the infected wound, but it is important to choose one that permits easy inspection. (Lipsky et al., Infectious Diseases Society of America [IDSA], 2004)

Primary Clinical Component

Chronic wound care; diabetes mellitus; diabetic foot ulcer; offloading/pressure relief devices (crutches, walkers, wheelchairs, custom shoes, depth shoes, shoe modifications, custom inserts, custom relief orthotic walkers [CROW], diabetic boots, forefoot and heel relief shoes, total contact casts)

Denominator Description

All patients aged 18 years and older with a diagnosis of diabetes and foot ulcer (see the related "Denominator Inclusions/Exclusions" field)

Numerator Description

Patients who were prescribed an appropriate method of offloading (pressure relief) within the 12 month reporting period (see the related "Numerator Inclusions/Exclusions" field)

Evidence Supporting the Measure

Evidence Supporting the Criterion of Quality

A clinical practice guideline or other peer-reviewed synthesis of the clinical evidence

One or more research studies published in a National Library of Medicine (NLM) indexed, peer-reviewed journal

Evidence Supporting Need for the Measure

Need for the Measure

Variation in quality for the performance measured

Evidence Supporting Need for the Measure

Jones KR, Fennie K, Lenihan A. Evidence-based management of chronic wounds. Adv Skin Wound Care. 2007 Nov;20(11):591-600. [42 references] [PubMed](#)

State of Use of the Measure

State of Use

Current routine use

Current Use

Internal quality improvement

Application of Measure in its Current Use

Care Setting

Physician Group Practices/Clinics

Professionals Responsible for Health Care

Physicians

Lowest Level of Health Care Delivery Addressed

Individual Clinicians

Target Population Age

Age greater than or equal to 18 years

Target Population Gender

Either male or female

Stratification by Vulnerable Populations

Unspecified

Characteristics of the Primary Clinical Component

Incidence/Prevalence

See the "Rationale" field.

Association with Vulnerable Populations

Unspecified

Burden of Illness

Unspecified

Utilization

Unspecified

Costs

Unspecified

Institute of Medicine (IOM) Healthcare Quality Report Categories

IOM Care Need

Getting Better

Living with Illness

IOM Domain

Effectiveness

Data Collection for the Measure

Case Finding

Users of care only

Description of Case Finding

All patients aged 18 years and older with a diagnosis of diabetes and foot ulcer

Denominator Sampling Frame

Patients associated with provider

Denominator Inclusions/Exclusions

Inclusions

All patients aged 18 years and older with a diagnosis of diabetes and foot ulcer

Note: Refer to the original measure documentation for administrative codes.

Exclusions

Documentation of medical reason(s) for not prescribing an appropriate method of offloading

(pressure relief) (e.g., non-plantar location)

Documentation of patient reason(s) for not prescribing an appropriate method of offloading (pressure relief)

Documentation of system reason(s) for not prescribing an appropriate method of offloading (pressure relief)

Relationship of Denominator to Numerator

All cases in the denominator are equally eligible to appear in the numerator

Denominator (Index) Event

Clinical Condition

Encounter

Denominator Time Window

Time window is a single point in time

Numerator Inclusions/Exclusions

Inclusions

Patients who were prescribed an appropriate* method of offloading (pressure relief) within the 12 month reporting period

*An appropriate method of offloading (pressure relief) includes any of the following: crutches, walkers, wheelchairs, custom shoes, depth shoes, shoe modifications, custom inserts, custom relief orthotic walkers (CROW), diabetic boots, forefoot and heel relief shoes, or total contact casts.

Note: Refer to the original measure documentation for administrative codes.

Exclusions

None

Measure Results Under Control of Health Care Professionals, Organizations and/or Policymakers

The measure results are somewhat or substantially under the control of the health care professionals, organizations and/or policymakers to whom the measure applies.

Numerator Time Window

Fixed time period

Data Source

Administrative data

Medical record

Level of Determination of Quality

Individual Case

Pre-existing Instrument Used

Unspecified

Computation of the Measure

Scoring

Rate

Interpretation of Score

Better quality is associated with a higher score

Allowance for Patient Factors

Unspecified

Standard of Comparison

Internal time comparison

Evaluation of Measure Properties

Extent of Measure Testing

Unspecified

Identifying Information

Original Title

Measure #6: offloading (pressure relief) of diabetic foot ulcers.

Measure Collection Name

The Physician Consortium for Performance Improvement® Measurement Sets

Measure Set Name

Chronic Wound Care Physician Performance Measurement Set

Submitter

American Medical Association on behalf of the American Society of Plastic Surgeons, Physician Consortium for Performance Improvement®, and National Committee for Quality Assurance - Medical Specialty Society

Developer

American Society of Plastic Surgeons - Medical Specialty Society

National Committee for Quality Assurance - Health Care Accreditation Organization

Physician Consortium for Performance Improvement® - Clinical Specialty Collaboration

Funding Source(s)

Unspecified

Composition of the Group that Developed the Measure

Scott Endsley, MD, MSc (*Co-Chair*); William A. Wooden, MD, FACS (*Co-Chair*); Nicholas Biasotto, DO; Kathleen Lawrence, RN, MSN, CWOCA; Sergey V. Bogdan, MD; Andrew Maurano, PA-C; Stephen K. Bubb, MD; Mark Morasch, MD; H. Gunner Deery, II, MD, FACP, FIDSA; Jessica Pedersen, MBA, OTR/L, ATP; Dirk M. Elston, MD; Michael M. Priebe, MD; Elof Eriksson, MD; Aamir Siddiqui, MD; George Fueredi, MD; Carole (Carrie) Sussman, PT, DPT; Matthew G. Garoufalis, DPM; Amy Wandel, MD, FACS; Sarah Kagan, PhD, RN

American Society of Plastic Surgeons: Melanie Dolak, MHA

American Medical Association: Joseph Gave, MPH; Karen Kmetik, PhD; Shannon Sims, MD, PhD; Samantha Tierney, MPH

National Committee for Quality Assurance: Phil Renner, MBA

PCPI Consultants: Rebecca Kresowik; Timothy Kresowik, MD

Financial Disclosures/Other Potential Conflicts of Interest

Conflicts, if any, are disclosed in accordance with the Physician Consortium for Performance Improvement® conflict of interest policy.

Adaptation

Measure was not adapted from another source.

Release Date

2008 Aug

Measure Status

This is the current release of the measure.

The Physician Consortium for Performance Improvement reaffirmed the currency of this measure in

November 2010.

Source(s)

American Society for Plastic Surgeons (ASPS), Physician Consortium for Performance Improvement® (PCPI), National Committee for Quality Assurance (NCQA). Chronic wound care physician performance measurement set. Chicago (IL): American Medical Association (AMA); 2008 Aug. 35 p. [19 references]

Measure Availability

The individual measure, "Measure #6: Offloading (Pressure Relief) of Diabetic Foot Ulcers," is published in "Chronic Wound Care Physician Performance Measurement Set." This document and technical specifications are available in Portable Document Format (PDF) from the American Medical Association (AMA)-convened Physician Consortium for Performance Improvement® Web site:

www.physicianconsortium.org

For further information, please contact AMA staff by e-mail at cqi@ama-assn.org.

NQMC Status

This NQMC summary was completed by ECRI Institute on April 7, 2009. The information was verified by the measure developer on June 4, 2009. The information was reaffirmed by the measure developer on November 17, 2010.

Copyright Statement

© 2008 American Medical Association and National Committee for Quality Assurance. All Rights Reserved.

CPT® Copyright 2007 American Medical Association

Disclaimer

NQMC Disclaimer

The National Quality Measures Clearinghouse® (NQMC) does not develop, produce, approve, or endorse the measures represented on this site.

All measures summarized by NQMC and hosted on our site are produced under the auspices of medical specialty societies, relevant professional associations, public and private organizations, other government agencies, health care organizations or plans, individuals, and similar entities.

Measures represented on the NQMC Web site are submitted by measure developers, and are screened solely to determine that they meet the [NQMC Inclusion Criteria](#).

NQMC, AHRQ, and its contractor ECRI Institute make no warranties concerning the content or its reliability and/or validity of the quality measures and related materials represented on this site. Moreover, the views and opinions of developers or authors of measures represented on this site do not necessarily state or reflect those of NQMC, AHRQ, or its contractor, ECRI Institute, and inclusion or hosting of measures in NQMC may not be used for advertising or commercial endorsement purposes.

Readers with questions regarding measure content are directed to contact the measure developer.